



RADEIN RE APPLICATION OF:

Jason Dominik Hool, Javier Urena, Fredrick Spears and Osamu Ohno

SERIAL NUMBER: 09/849,731

FILED: May 3, 2001

FOR: A DIAGNOSTIC PETTE ASSEMBLY INCLUDING AUTOMATED

ASPIRATION APPARATUS

PATENT

ART UNIT NO.: 1743

EXAMINER:

Dwayne K. Handy

PECEIVED
TO 1700

ATTORNEY DOCKET NO .:

HCDI1786

San Jose, California January 15, 2004

I hereby certify that this Response A and all documents referred to as enclosed therein is being deposited with the United States Postal Service on January 15, 2004in an envelope marked as First Class Mail addressed to Mail Stop: Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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RESPONSE A TRANSMITTAL

Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

This Response Transmittal is being submitted in response to the Office Action dated September 24, 2003, relating to the above-identified application. Reexamination and reconsideration of said application are respectfully requested. Please note that there was an error in the original submission of this case. The correct file number of this case is *HCDI1786*. The Office and the Examiner are requested to take note of this change.

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RESPONSE A TRANSMITTAL ATTORNEY DOCKET NO.: HCDI1786

January 15, 2004

Т	Transmitted herewith is Response A in the above-identified application.									
	Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.									
<u>x</u> (Corrected Drawings, to wit: Figs. 3 and 8 with appropriate red lettering.									
	A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.									
X F	Fee of \$55 for extension of time in the first month.									
No additional fee is required.										
The fee has been calculated as shown below:										
	(Col. 1) (Col. 2) (Col. 3)					OTHER THAN SMALL ENTITY SMALL ENTITY				
	Claims Remaining After Amendment		Highest No Previously Paid for	Present Extra		RATE	ADDIT. FEE		RATE	ADDIT. FEE
TOTAL	* 19	MINUS	** 21	= 0		X 11 =	\$	1	X 22 =	\$
INDEP.	* 4	MINUS	*** 5	= 0		X 39=	\$] [X 78=	\$
FIRST	PRESENTATIO	N OF MUL	TIPLE DEPEND	DANT CLAIM		+125=	\$		+250=	\$
						TOTAL ADDIT. FEE	\$0		TOTAL ADDIT. FEE	\$0
 If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3 If the "Highest number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed. 										
The total fee required with this communication is \$.00 and is provided as follows:										
X A check in the amount of \$55.00 is attached. Check Number										
			Res	pectfully su	ubmitt	ted				
PENINSULA IP GROUP										

Bouglas A. Chaikin

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